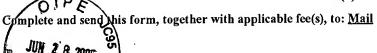
## JUN 2 9 2005

## PART B - FEE(S) TRANSMITTAL



Mail Stop ISSUE FEE Commissioner for Patents

JUN 2 8 2005	JUN 2'8 2005 G or Fax				P.O. Box 1450 Alexandria, Virginia 22313-1450 (703) 746-4000			
IN ARUCTIONS: This appropriate. All further indicates unless soft accomming to the state of the	I'm should be used for tran briespondence including the below or directed otherwise ons.	smitting the ISSU Patent, advance or in Block 1, by (a	JE FEE and ders and not of specifying	PUBLICATION FEI fication of maintena a new correspondence	E (if requince fees we address;	red). Blocks 1 through 5 vill be mailed to the currer and/or (b) indicating a sep	should be completed where at correspondence address a parate "FEE ADDRESS" for	
CURRENT CORRESPONDE	CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)				Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.			
20995 7590 03/28/2005 KNOBBE MARTENS OLSON & BEAR LLP 2040 MAIN STREET FOURTEENTH FLOOR				Certificate of Mailing or Transmission  I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below.				
IRVINE, CA 92614 30/2005 FFANAIA3 00000044 10685068				John		rover 42,6	- (Denogitor's name)	
MAA AA AD							(Signature)	
FC:2501 F <u>C:1504</u>	300.00 DP				שניים	28,2005		
APPLICATION NO.	FILING DATE		FIRST NAME	INVENTOR		ATTORNEY DOCKET NO.	CONFIRMATION NO.	
10/685,068 TITLE OF INVENTION:		ck Flaherty		MASIBP.010C2	4370			
APPLN. TYPE	SMALL ENTITY	ISSUE F	EE	PUBLICATION	FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	YES	\$700		\$300		\$1000	06/28/2005	
EXAMINER		ART UNIT		CLASS-SUBCLA	ASS	•		
NASSER, ROBERT L		3736		600-485000	)	•		
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			2. For printing on the patent front page, list  (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.					
	ID RESIDENCE DATA TO B							
PLEASE NOTE: Unle recordation as set forth	ss an assignee is identified be in 37 CFR 3.11. Completion	elow, no assignee of this form is NO	data will app T a substitute	ear on the patent. If for filing an assignment	`an assign ent.	ee is identified below, the	document has been filed for	
(A) NAME OF ASSIG	NEE	(B	) RESIDENC	CE: (CITY and STAT	E OR COU	JNTRY)		
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Please check the appropria	ate assignee category or catego		nited on the p		ual 🙀 Co	orporation or other private g	roup entity Governmen	
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Publication Fee (No small entity discount permitted)				Payment by credit card. Form PTO-2038 is attached.				
Advance Order - #	The Dire	ector is hereby authorized by charge the required fee(s), or credit any overpayment, to count Number 111-1410 (enclose an extra copy of this form).						
a. Applicant claims	s (from status indicated above SMALL ENTITY status. See	37 CFR 1.27.	☐ b. Applic	ant is no longer claim	ning SMAI	LL ENTITY status. See 37	CFR 1.27(g)(2).	
The Director of the USPTONOTE: The Issue Fee and interest as shown by the re	O is requested to apply the Isss Publication Fee (if required) vecords of the United States Pate	ue Fee and Publica vill not be accepted ent and Trademark	tion Fee (if ar d from anyone Office.	y) or to re-apply any c other than the applic	previously ant; a regi	y paid issue fee to the appli stered attorney or agent; or	cation identified above. the assignee or other party in	
Authorized Signature	John M. Grove	17 6	1.0	D:	ate			
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Registration No. Typed or printed name\_

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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Intellectual Property Law



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John M. Grover jgrover@kmob.com

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

## CERTIFICATE OF MAILING BY "EXPRESS MAIL"

Attorney Docket No.

MASIBP.010C2

Applicant(s)

Flaherty, et al.

For

RAPID NON-INVASIVE BLOOD PRESSURE

**MEASURING DEVICE** 

Attorney

John M. Grover

"Express Mail" Label No.:

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**Date of Deposit** 

June 28, 2005

I hereby certify that the accompanying

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Kim Collins

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Case Docket No. MASIBP.010C2

Date: June 28, 2005

### IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s)

Flaherty, et al.

Appl. No.

10/685,068

Filed

October 14, 2003

For

RAPID NON-INVASIVE

BLOOD PRESSURE MEASURING DEVICE

Group Art Unit:

3736

Class/Sub-Class:

600-485000

Examiner

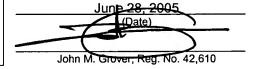
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MAIL STOP ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Dear Sir:

Enclosed for filing is the Issue Fee for the above-identified application:

- (X) Form PTOL-85.
- (X) A check in the amount of \$1,000 to cover the issue fee and publication fee is enclosed.
- (X) The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment, to Account No. 11-1410.
- (X) Return prepaid postcard.

John M. Grover Registration No. 42,610 Attorney of Record Customer No. 20,995 (949) 760-0404